

2000 HSBC PLAZA
ROCHESTER / NEW YORK 14604-2404
T 585.325.7570 / F 585.325.5458

REACHUS@HISCOCKBARCLAY.COM

DECLARATION AND POWER OF ATTORNEY

As below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED OPHTHALMIC AND CONTACT LENS SOLUTIONS CONTAINING PEPTIDES AS PRESERVATIVE

the specification of which (check only one):

- ☒ is attached hereto.
- ☐ was filed as United States Patent Application
Serial No. _____
on _____
and was amended on _____
(if applicable)
- ☐ was filed as PCT Patent Application
Serial No. _____
on _____
and was amended under PCT Article 19
on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the claims of this application in accordance with Title 37, CFR §1.56. I also acknowledge the duty to disclose all information which is material to the patentability as defined in 37 CFR §1.56, which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by us on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

**PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS
UNDER 35 U.S.C. §119(a)-(d) or 365(b), or 365(a):**

COUNTRY (if PCT indicate PCT)	APPLICATION NUMBER	DATE OF FILING	PRIORITY CLAIMED UNDER 35 U.S.C. §119 (YES/NO)
PCT	PCT/US2004/011575	April 15, 2004	Yes

I hereby claim benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

I hereby claim benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:	Filing Date	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
Application Number(s) 60/462,940	April 15, 2003	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or 365(c) of any PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior applications and the national or PCT international filing date of this application:

**PRIOR U.S. APPLICATION OR PCT INTERNATIONAL APPLICATION(S)
DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. §120 or 365(c):**

APPLICATION NUMBER	DATE OF FILING	STATUS: (PATENTED, PENDING OR ABANDONED)
None		

POWER OF ATTORNEY: As the named inventor, I hereby appoint the following attorney(s) and/or agents associated with HISCOCK & BARCLAY, LLP, **Customer No.44331**, to prosecute the above-identified application and transact all business in the Patent and Trademark Office connected therewith:

All correspondence should be sent to the following address:

Customer No.: 44331

HISCOCK & BARCLAY, LLP
2000 HSBC Plaza
Rochester, NY 14604-2404

Direct telephone calls should be directed to:

Eleanor M. Hynes, Esq.
Reg. No. 58,013
Telephone No.: (585) 325-7570
Facsimile No.: (585) 325-5458

Wherefore I petition that letters patent be granted to me for the invention or discovery described and claimed in the above referenced application specification and claims, and hereby subscribe my name to said specification and claims and to the foregoing declaration, power of attorney, and this petition.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name Inventor: Francis X. Smith

Inventor's signature Francis X. Smith Date Aug. 19, 2006

Residence: 22 Fox Run Lane
Salem, NH 03079

Citizenship: USA

Post Office Address: Same as above

Full name Inventor: Kathryn S. Crawford

Inventor's signature _____ Date _____

Residence: 23 Overledge Drive
Derry, NH 03038

Citizenship: USA

Post Office Address: Same as above

HISCOCK BARCLAY

BUFFALO • ROCHESTER • SYRACUSE • ALBANY • NEW YORK

2000 HSBC PLAZA
ROCHESTER / NEW YORK 14604-2404
T 585.325.7570 / F 585.325.5455

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PATENT
Atty. Docket No. 3009094 US01

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UNDER 35 U.S.C. §119(a)-(d) or 365(b), or 365(a):**

COUNTRY (If PCT indicate PCT)	APPLICATION NUMBER	DATE OF FILING	PRIORITY CLAIMED UNDER 35 U.S.C. §119 (YES/NO)
PCT	PCT/US2004/011575	April 15, 2004	Yes

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DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. §120 or 365(c):**

APPLICATION NUMBER	DATE OF FILING	STATUS: (PATENTED, PENDING OR ABANDONED)
None		

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HISCOCK & BARCLAY, LLP
2000 HSBC Plaza
Rochester, NY 14604-2404

PATENT
Any. Docket No. 3009094 US01

Direct telephone calls should be directed to:

Elcanor M. Hynes, Esq.
Reg. No. 58,013
Telephone No.: (585) 325-7570
Facsimile No.: (585) 325-5458

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Full name Inventor: Francis X. Smith

Inventor's signature _____ Date _____

Residence: 22 Fox Run Lane
Salem, NH 03079

Citizenship: USA

Post Office Address: Same as above

Full name Inventor: Kathryn S. Crawford

Inventor's signature  _____ Date 8/15/06

Residence: 20 Ivy Lane,
Andover, MA 01810

Citizenship: USA

Post Office Address: Same as above